

Come join the "Miracle League"



Co-sponsored by the Rochester Miracle League Committee and The Parks & Recreation Department.

The Miracle League is for individuals who want to play ball and who have either a physical and/or cognitive disability (ages 4 years and older)!

The Miracle Field complex is located in NW Rochester and is a solid playing surface allowing barrier-free accessibility over the entire field. Bases are painted on the field so individuals using wheel chairs, crutches, or walkers, or persons with visual and/or cognitive issues can easily maneuver the entire field without obstacle!

Youth

COST: FREE!

AGES: 4-12 years of age.

DATES: Tuesdays, June 15-August 3* TIME: 6:00-7:00 p.m. & 7:00-8:00 p.m.

(Times will be assigned and schedules mailed in mid-May).

DESCRIPTION: Play will be non-competitive, no score is kept & everyone bats. Youth requiring assistance will be given a buddy to partner with; please indicate on form below if one is needed or if you would like to provide assistance. T-shirt and team picture will be provided.

Adult

(Non-competitive)

COST: FREE!

AGES: 13 years and older

DATES: Mondays, June 14-August 2*
TIME: 6:00-7:00 p.m. & 7:00-8:00 p.m.

(Times will be assigned and schedules mailed in mid-May)

DESCRIPTION: Play will be non-competitive, no score is kept & everyone bats. Persons requiring assistance will be given a buddy to partner with; please indicate on form below if one is needed or if you would like to provide assistance. T-shirt and team picture will be provided.

Adult Compatitive)

(Competitive)

COST: FREE!

AGES: 13 years and older

DATES: Mondays, June 14-August 2*
TIME: 6:00-7:00 p.m. & 7:00-8:00 p.m.

(Schedules will be mailed in mid-May).

DESCRIPTION: Play will be competitive, on a 75' field, Umpires will keep scores and call outs. A t-shirt and team picture will be provided.



See following page



WHAT YOU NEED TO KNOW



REGISTRATION DEADLINE: Friday, March 26. If you miss the registration deadline, **PLEASE CALL (507) 328-2539 TO SEE IF THERE ARE STILL OPENINGS,** once teams are filled, no further registrations will be accepted. **A Release form is attached is MUST BE on file in order to play.**



Please indicate whether there is a **medical** (i.e. asthma, seizures, diabetes, etc.) or behavioral (i.e. gets upset easily, runs way, hits, etc.) issue at the bottom of the attached form.



SCHEDULES: Will be mailed out in May and will also be posted online at http://www.semnmiracleleague.com/



PICTURES: Will be taken on Monday, June 21 for Adults and Tuesday, June 22 for Youth; plan to arrive ½ hour prior to your game time. Be sure to wear your team t-shirt for pictures and thereafter on a weekly basis. **T-shirts are free and will be given out the first night of the league; please indicate your size on the Registration form below.**



For photos, news, schedules, and other information, check out our website at www.semnmiracleleague.com



There will be no makeup dates for rain outs - see following Cancellation Policy.

Weather Related Cancellation Policy -

The Miracle League will cancel play under the following conditions;

- Inclement or severe weather, or if a Storm Warning has been issued.
- Heat Index Warning on day of program.

Call (507) 328-2539 AFTER 4:00 p.m. for a recorded message; postings will be made online at KTTC under the Storm & Delay Announcements as well as at www.semnmiracleleague.com.



Absolutely **NO SMOKING** is allowed; this pertains to athletes & spectators.



Miracle League DOB: _____ Age: ___ Emergency #: _____ Phone #: Address: _____ (Street, City, State, ZIP) Email address: Please indicate **primary** disability by checking one of the following: □ Cognitive Disability or □ Physical Disability **LEAGUE OPTIONS** (Choose one only) □ Youth (4-12 years) □ **Adult Non-competitive** (Ages 13+ years) □ Adult Competitive Option (Ages 13+ years) T- Shirt Size Youth Adult □ Small □ Small □ X-Large □ Medium □ Medium □ 2 X-Large □ 3 X-Large □ Large Large Will you need a "buddy" to help run bases? □ Will provide own buddy □ No If you would like to volunteer as a buddy, please complete the following: Name: _____ Phone: _____ Email Address: Is there a medical or behavioral issue we should be aware of? □ No □ Yes: please explain:

Return to The Parks & Recreation Department **Adaptive Recreation Division** 201 4th Street SE #150, Rochester, MN 55904

Miracle League Release Form

(Complete and return with your registration form)

The Miracle League of Southeastern Minnesota and its officers hereby agree to allow to participate in the 2010 Miracle League Ball Program covering the dates of June 14-August 3.

In order to participate in this activity, I agree on behalf of the participant named above to hold the Miracle League agents & volunteers harmless and waive any right to make claims or lawsuits against the League or anyone working on behalf of the Miracle League for any injuries or damages related to the alleged negligence of the League. This waiver does not apply to any injuries or damages that are the result of any willful, wanton or intentional misconduct. Participation in this activity is voluntary and I understand the effect of this waiver on my legal rights and those of the participant named above.

AND

PHOTOGRAPH/MEDIA RELEASE

My permission (check below)

- □ Is given
- □ Is **NOT** given

for my child/consumer's picture to be taken and image used, and name released to the media and/or for Miracle League purposes.

| SIGNED: | |
|------------------------------|-----------|
| | |
| RELATIONSHIP TO PARTICIPANT: | |
| | Self |
| | Parent |
| | Caregiver |
| | |
| DATE:/ | |